

FILED

FINANCIAL AFFIDAVIT IN SUPPORT OF REQUEST FOR ATTORNEY, EXPERT OR OTHER COURT SERVICES WITHOUT PAYMENT OF FEE		JUN 11 2008 JUDGE JOAN B. GOTTSCHALL United States District Court
IN UNITED STATES <input type="checkbox"/> MAGISTRATE <input checked="" type="checkbox"/> DISTRICT <input type="checkbox"/> APPEALS COURT or <input type="checkbox"/> OTHER PANEL (Specify below)		
IN THE CASE OF <u>US</u> v.s. <u>CARROLL</u>		
FOR <u>ND IL</u> AT <u>CHICAGO</u>		
PERSON REPRESENTED (Show your full name) CECILIA EDWARDS		DOCKET NUMBERS Magistrate District Court 07 CR 840 Court of Appeals
CHARGE/OFFENSE (describe if applicable & check box →) 18 USC 1343-44		1 <input checked="" type="checkbox"/> Defendant—Adult 2 <input type="checkbox"/> Defendant - Juvenile 3 <input type="checkbox"/> Appellant 4 <input type="checkbox"/> Probation Violator 5 <input type="checkbox"/> Parole Violator 6 <input type="checkbox"/> Habeas Petitioner 7 <input type="checkbox"/> 2255 Petitioner 8 <input type="checkbox"/> Material Witness 9 <input type="checkbox"/> Other

ANSWERS TO QUESTIONS REGARDING ABILITY TO PAY

EMPLOYMENT	Are you now employed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Am Self-Employed									
	Name and address of employer: _____									
	IF YES, how much do you earn per month? \$ _____		IF NO, give month and year of last employment How much did you earn per month? \$ _____							
	If married is your Spouse employed? <input type="checkbox"/> Yes <input type="checkbox"/> No IF YES, how much does your Spouse earn per month? \$ <u>DNA</u> If a minor under age 21, what is your Parents or Guardian's approximate monthly income? \$ _____									
ASSETS	Have you received within the past 12 months any income from a business, profession or other form of self-employment, or in the form of rent payments, interest, dividends, retirement or annuity payments, or other sources? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No									
	IF YES, GIVE THE AMOUNT RECEIVED & IDENTIFY THE SOURCES <u>1200 NO</u> RECEIVED <u>Dependence</u> SOURCES <u>SSI</u>									
CASH	Have you any cash on hand or money in savings or checking accounts? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No IF YES, state total amount \$ _____									
PROPERTY	Do you own any real estate, stocks, bonds, notes, automobiles, or other valuable property (excluding ordinary household furnishings and clothing)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No									
		VALUE	DESCRIPTION							
IF YES, GIVE THE VALUE AND \$ DESCRIBE IT		_____	_____							
		_____	_____							
		_____	_____							
DEPENDENTS { <table style="display: inline-table; vertical-align: top;"> <tr> <td>MARITAL STATUS</td> <td>Total No. of Dependents</td> </tr> <tr> <td><input checked="" type="checkbox"/> SINGLE</td> <td rowspan="4" style="text-align: center; vertical-align: middle;">2</td> </tr> <tr> <td><input type="checkbox"/> MARRIED</td> </tr> <tr> <td><input type="checkbox"/> WIDOWED</td> </tr> <tr> <td><input type="checkbox"/> SEPARATED OR DIVORCED</td> </tr> </table>				MARITAL STATUS	Total No. of Dependents	<input checked="" type="checkbox"/> SINGLE	2	<input type="checkbox"/> MARRIED	<input type="checkbox"/> WIDOWED	<input type="checkbox"/> SEPARATED OR DIVORCED
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<input type="checkbox"/> MARRIED										
<input type="checkbox"/> WIDOWED										
<input type="checkbox"/> SEPARATED OR DIVORCED										
OBLIGATIONS & DEBTS	DEBTS & MONTHLY BILLS (LIST ALL CREDITORS, INCLUDING BANKS, LOAN COMPANIES, CHARGE ACCOUNTS, ETC.)									
	APARTMENT OR HOME: <u>APT RENT</u> Creditors <u>CHARTER ONE</u>									
	Total Debt		Monthly Paymt.							
	\$ <u>9000</u>		\$ <u>350</u>							

I certify under penalty of perjury that the foregoing is true and correct. Executed on (date)

SIGNATURE OF DEFENDANT
(OR PERSON REPRESENTED)
6/11/08
Cecilia Edwards